

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

L PAC

ADDRESS (number and street) ▼

601 13TH STREET NW SUITE 730N

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20005

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00519413

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

**4. TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☒ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SARAH SCHMIDT

Signature of Treasurer

SARAH SCHMIDT

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 31 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

L PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2013

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2013</div></div>		<div><div></div><div>59917.30</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>59917.30</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>216981.00</div></div>	<div><div></div><div>216981.00</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>276898.30</div></div>	<div><div></div><div>276898.30</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>105112.65</div></div>	<div><div></div><div>105112.65</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>171785.65</div></div>	<div><div></div><div>171785.65</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

L PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01	/	01	/	2013

To:

M M	/	D D	/	Y Y Y Y Y
06	/	30	/	2013

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

12250.00

12250.00

(ii) Unitemized .....

505.00

505.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

12755.00

12755.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

12755.00

12755.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

204226.00

204226.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ►

216981.00

216981.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

216981.00

216981.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	593.00	593.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	593.00	593.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	104519.65	104519.65
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	105112.65	105112.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	105112.65	105112.65

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12755.00	12755.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12755.00	12755.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	593.00	593.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	593.00	593.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 35  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

## **A. Gretchen Hoover**

Mailing Address P.O. Box 1087

City State Zip Code  
 Rhinelander WI 54501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 30 / 2013

Transaction ID : SA11AI.6109

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. SARAH SCHMIDT**

Mailing Address 845 Michigan ave

City State Zip Code  
 Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 30 / 2013

Transaction ID : SA11AI.6049

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Donna Victoria**

Mailing Address 1104 Merwood Drive

City State Zip Code  
 Takoma Park MD 20912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Victoria Research

Market Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 18 / 2013

Transaction ID : SA11AI.5993

Amount of Each Receipt this Period

2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

12000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 35  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Gail Wright**

Mailing Address 4300 Ledgeview Rd

City State Zip Code  
Fort Worth TX 76109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2013

Transaction ID : SA11AI.6104

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

12250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

## **A. Susan Allee**

Mailing Address 200 W 108th Street

City  
New York

State Zip Code  
NY 10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2013

**Transaction ID : SA17.5979**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

## **B. Robert Bloch**

Mailing Address 325 N. East

City  
Oak Park

State Zip Code  
IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dowd, Bloch & Bennett

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2013

**Transaction ID : SA17.6000**

Amount of Each Receipt this Period

1000.00

Contribution to IE Only Acct.

Full Name (Last, First, Middle Initial)

## **C. Lisa Bobby**

Mailing Address 2A Colby Court

City  
Lincoln Park

State Zip Code  
NJ 07035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Tennis Professional

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 13 / 2013

**Transaction ID : SA17.6080**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Karen Dixon**

Mailing Address 2414 Tracy Place, NW

City  
Washington

State Zip Code  
DC 20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**06 / 20 / 2013**

**Transaction ID : SA17.6100**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

**B. Catherine Duca**

Mailing Address 67 Dryden Rd

City  
Upper Montclair

State Zip Code  
NJ 07043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Self-employed

Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**06 / 11 / 2013**

**Transaction ID : SA17.6078**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

**C. Claire Ellis**

Mailing Address 318 1st St.

City  
Brooklyn

State Zip Code  
NY 11215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Self-employed

Product Development Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**06 / 12 / 2013**

**Transaction ID : SA17.6079**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 35  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

## **A. Agnes Gund**

Mailing Address 765 Park Avenue  
#14B

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Art Historian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2013

**Transaction ID : SA17.5994**

Amount of Each Receipt this Period

25000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

## **B. Agnes Gund**

Mailing Address 765 Park Avenue  
#14B

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Art Historian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 14 / 2013

**Transaction ID : SA17.6081**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

## **C. Agnes Gund**

Mailing Address 765 Park Avenue  
#14B

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Art Historian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

26000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 14 / 2013

**Transaction ID : SA17.6082**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

26000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 35

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Alan Hergott**

Mailing Address 150 S. Rodeo Dr.  
3rd Floor

City State Zip Code  
Beverly Hills CA 90212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Bloom Hergot Diemer et. al.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**04 / 03 / 2013**

**Transaction ID : SA17.6001**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

**B. Joanne Herman**

Mailing Address 10 Nouvelle Way, Unit S909

City State Zip Code  
Natick MA 01760

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

**04 / 23 / 2013**

**Transaction ID : SA17.6002**

Amount of Each Receipt this Period

1000.00

Contribution to IE Only Acct.

Full Name (Last, First, Middle Initial)

**C. Joanne Herman**

Mailing Address 10 Nouvelle Way, Unit S909

City State Zip Code  
Natick MA 01760

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

**06 / 06 / 2013**

**Transaction ID : SA17.6060**

Amount of Each Receipt this Period

100.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 35  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

## **A. Gretchen Hoover**

Mailing Address P.O. Box 1087

City State Zip Code  
 Rhinelander WI 54501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**02 / 25 / 2013**

**Transaction ID : SA17.5973**

Amount of Each Receipt this Period

1000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

## **B. Gretchen Hoover**

Mailing Address P.O. Box 1087

City State Zip Code  
 Rhinelander WI 54501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**06 / 17 / 2013**

**Transaction ID : SA17.6083**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

## **C. Linda Ketner**

Mailing Address 12 Church Street

City State Zip Code  
 Charleston SC 29401-2744

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

KSI Lead. and Management Dev.

Occupation

Management Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**06 / 25 / 2013**

**Transaction ID : SA17.6094**

Amount of Each Receipt this Period

10000.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 35

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Billie Jean King**

Mailing Address 21 Rickland Dr.

City

Randolph

State

NJ

Zip Code

07869

FEC ID number of contributing  
federal political committee.

C

Name of Employer

World Team Tennis

Occupation

Promoter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 06 / 2013

**Transaction ID : SA17.6033**

Amount of Each Receipt this Period

10000.00

Contribution for IE Only Acct

Full Name (Last, First, Middle Initial)

**B. Sharon Kleinbaum**

Mailing Address 165 Seaman Avenue 2B

City

New York City

State

NY

Zip Code

10034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Rabbi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 21 / 2013

**Transaction ID : SA17.6102**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

**C. Suzanne LeVan**

Mailing Address 320 Central Park West, Apt. 14F Ap

City

New York

State

NY

Zip Code

10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2013

**Transaction ID : SA17.6086**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

## **A. Amy Mandel**

Mailing Address 126 Nordic Trail

City State Zip Code  
 Asheville NC 28804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 20 / 2013

**Transaction ID : SA17.6037**

Amount of Each Receipt this Period

2500.00

Contribution for IE Only Acct.

Full Name (Last, First, Middle Initial)

## **B. Kris Olson**

Mailing Address 2245 Eagle Greens Dr

City State Zip Code  
 Reno SD 89521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Newlightsoftware.com

Occupation

Software Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 28 / 2013

**Transaction ID : SA17.6047**

Amount of Each Receipt this Period

200.00

Contribution for IE Only Acct.

Full Name (Last, First, Middle Initial)

## **C. Laura Ricketts**

Mailing Address 1615 West Rosehill Drive

City State Zip Code  
 Chicago IL 60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA17.5987**

Amount of Each Receipt this Period

50000.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

52700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 35  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Alix Ritchie**

Mailing Address PO Box 30220

City State Zip Code  
Fort Lauderdale FL 33303

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Self

Corporate Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

**03 / 27 / 2013**

**Transaction ID : SA17.5989**

Amount of Each Receipt this Period

50000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

**B. Nan Schaffer**

Mailing Address 2414 Tracy Place, NW

City State Zip Code  
Washington DC 20008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Self

Conservationist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

**06 / 25 / 2013**

**Transaction ID : SA17.6093**

Amount of Each Receipt this Period

25000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

**C. SARAH SCHMIDT**

Mailing Address 845 Michigan ave

City State Zip Code  
Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Self

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05 / 24 / 2013**

**Transaction ID : SA17.6045**

Amount of Each Receipt this Period

5000.00

Contribution for IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Jayne Sherman**

Mailing Address 753 Springs Fireplace Rd

City State Zip Code  
 East Hampton NY 11937

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Photobarn

Occupation

Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**06 / 24 / 2013**

**Transaction ID : SA17.6103**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

**B. Naomi Sobel**

Mailing Address 7 Holyoke Road #2

City State Zip Code  
 Somerville MA 02144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Astraea Lesbian Found. for Jus

Occupation

Fundraising

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

**06 / 05 / 2013**

**Transaction ID : SA17.6052**

Amount of Each Receipt this Period

1800.00

Contribution for IE Only Account

Full Name (Last, First, Middle Initial)

**C. Kristine Stallone**

Mailing Address 376 Read Avenue

City State Zip Code  
 Tuckahoe NY 10707

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Ameican Jewish Service

Occupation

VP of Finance & Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**06 / 20 / 2013**

**Transaction ID : SA17.6101**

Amount of Each Receipt this Period

500.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2800.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

## **A. Margaret Traub**

Mailing Address 145 Hicks Street  
Apt. A31

City State Zip Code  
Brooklyn NY 11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Adesso Inc.

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2013

**Transaction ID : SA17.6133**

Amount of Each Receipt this Period

5000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

## **B. Urvashi Vaid**

Mailing Address 230 West End Ave  
#10C

City State Zip Code  
New York NY 10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Columbia Law School

Occupation

Attorney/Scholar

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2013

**Transaction ID : SA17.5981**

Amount of Each Receipt this Period

5000.00

Contribution to IE Only Account

Full Name (Last, First, Middle Initial)

## **c. Urvashi Vaid**

Mailing Address 230 West End Ave  
#10C

City State Zip Code  
New York NY 10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Columbia Law School

Occupation

Attorney/Scholar

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2013

**Transaction ID : SA17.6132**

Amount of Each Receipt this Period

2500.00

Contribution to IE Only Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

12500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Carla Wallace**

Mailing Address 120 N Jane Street

City

Louisville

State

KY

Zip Code

40206

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Wallace Farm LLC

Occupation

Farm Manager and Community Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**05 / 24 / 2013**

**Transaction ID : SA17.6046**

Amount of Each Receipt this Period

1000.00

Contribution for IE Only Acct.

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

202600.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City WASHINGTON      State DC      Zip Code 20005

Purpose of Disbursement  
Bank Charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      31      2013
**Transaction ID : SB21B.5910**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City WASHINGTON      State DC      Zip Code 20005

Purpose of Disbursement  
Bank Charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      28      2013
**Transaction ID : SB21B.5911**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City WASHINGTON      State DC      Zip Code 20005

Purpose of Disbursement  
Bank Charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      29      2013
**Transaction ID : SB21B.5912**

Amount of Each Disbursement this Period

15.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 35

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City WASHINGTON      State DC      Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2013

Transaction ID : SB21B.5991

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City WASHINGTON      State DC      Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : SB21B.6051

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Democracy Engine**

Mailing Address 2125 14th Street, NW #101W

City Washington      State DC      Zip Code 20009

Purpose of Disbursement  
Credit Card Processing fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2013

Transaction ID : SB21B.6050

Amount of Each Disbursement this Period

200.30

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.30

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

L PAC

### A. Democracy Engine

Mailing Address 2125 14th Street, NW #101W

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Date of Disbursement

Transaction ID : SB21B.6127

Amount of Each Disbursement this Period

12.30

Full Name (Last, First, Middle Initial)

### B. Democracy Engine

Mailing Address 2125 14th Street, NW #101W

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.6128

Amount of Each Disbursement this Period

0.70

Full Name (Last, First, Middle Initial)

### C. Democracy Engine

Mailing Address 2125 14th Street, NW #101W

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Date of Disbursement

Transaction ID : SB21B.6129

Amount of Each Disbursement this Period

0.70

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Response	Percentage
Yes	13.70
No	86.30

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

L PAC

Age Group	Percentage
18-24	~10%
25-34	210.60%
35-44	~10%
45-54	~10%
55-64	~10%
65-74	~10%
75-84	~10%
85+	~10%

State:  District:

Category/  
Type

State:  District:

Category/  
Type

State:  District:

210.60

499.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 35

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement  
Credit Card Processing Service - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		03		2013

**Transaction ID : SB29.5914**

Amount of Each Disbursement this Period

217.92
--------

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement  
Bank Charge - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2013

**Transaction ID : SB29.5920**

Amount of Each Disbursement this Period

15.00
-------

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement  
Bank Charge - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2013

**Transaction ID : SB29.5927**

Amount of Each Disbursement this Period

28.57
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

261.49
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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

### A. BANK OF AMERICA

Date of Disbursement

Transaction ID : SB29.5929

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

15.00

## B. BANK OF AMERICA

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB29.5934

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

Age Group	Number of people
13-17	10.0
18-24	15.0
25-34	20.0
35-44	25.0
45-54	20.0
55-64	15.0
65-74	10.0
75-84	5.0
85+	2.0

### C. BANK OF AMERICA

Date of Disbursement



Transaction ID : SB29.6074

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

7.28

47.28



	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

### A. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement
Bank Charge - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Three 10-pin D-sub connectors are shown, labeled 03, 07, and 2013. The 03 connector has two pins labeled M. The 07 connector has two pins labeled D. The 2013 connector has four pins labeled Y.

Transaction ID : SB29.5935

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	23.5
25-34	21.5
35-44	19.5
45-54	17.5
55-64	15.5
65-74	13.5
75-84	11.5
85+	9.5

Full Name (Last, First, Middle Initial)

## B. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement
Bank Charge - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB29.5936

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	14.5
25-34	13.5
35-44	12.5
45-54	11.5
55-64	10.5
65-74	9.5
75-84	8.5
85+	1.5

Full Name (Last, First, Middle Initial)

### C. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement
Bank Charge - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB29.5940

Amount of Each Disbursement this Period

12.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Grade	Number of students
1st	10
2nd	12
3rd	15
4th	18
5th	20
6th	22
7th	25
8th	28
9th	30
10th	32
11th	35
12th	38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 35

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Disbursement  
Credit Card Processing Fee - IE only Acct.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2013

**Transaction ID : SB29.6012**

Amount of Each Disbursement this Period

218.24
--------

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Disbursement  
Bank Fee - IE only Acct.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2013

**Transaction ID : SB29.5997**

Amount of Each Disbursement this Period

15.00
-------

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Disbursement  
Bank Fee - IE only Acct.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2013

**Transaction ID : SB29.5999**

Amount of Each Disbursement this Period

25.00
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

258.24
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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

### A. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement	Bank Fee - IE Only Acct.

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement



Transaction ID : SB29.6039

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	23.5
25-34	21.5
35-44	19.5
45-54	17.5
55-64	15.5
65-74	13.5
75-84	11.5
85+	1.5

Full Name (Last, First, Middle Initial)

## B. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement	
Bank Fee - IE Only Acct.	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB29.6042

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

### C. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement	
Credit Card Discount - IE Only Acct.	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement



Transaction ID : SB29.6043

Amount of Each Disbursement this Period

100.14

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Age Group	Percentage
18-24	150.14
25-34	~100
35-44	~80
45-54	~60
55-64	~40
65-74	~20
75-84	~10
85+	~5

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

### A. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement	Bank Fee - IE Only Acct.

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB29.6014

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	12.5%
25-34	12.5%
35-44	12.5%
45-54	12.5%
55-64	12.5%
65-74	12.5%
75-84	12.5%
85+	12.5%

Full Name (Last, First, Middle Initial)

## B. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement
Bank Fee - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB29.6063

Amount of Each Disbursement this Period

748.71

Full Name (Last, First, Middle Initial)

### C. BANK OF AMERICA

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement	
Bank Fee - IE Only Account	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

06 / 07 / 2013

Transaction ID : SB29.6065

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	12.5%
25-34	10.0%
35-44	7.5%
45-54	5.0%
55-64	2.5%
65-74	1.25%
75+	1.25%

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

778.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 35

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 700 13TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement  
Bank Fee - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2013

**Transaction ID : SB29.6075**

Amount of Each Disbursement this Period

25.00
-------

Full Name (Last, First, Middle Initial)

**B. Berstein Shur Law Firm**

Mailing Address 100 Middle Street

City	State	Zip Code
Portland	ME	04104

Purpose of Disbursement  
Legal Consulting Fee - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2013

**Transaction ID : SB29.6073**

Amount of Each Disbursement this Period

8694.00
---------

Full Name (Last, First, Middle Initial)

**C. Civitas Public Affairs**

Mailing Address 601 13th Street, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2013

**Transaction ID : SB29.5933**

Amount of Each Disbursement this Period

1759.21
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10478.21
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 35

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

L PAC

Full Name (Last, First, Middle Initial)

**A. Civitas Public Affairs**

Mailing Address 601 13th Street, NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2013

**Transaction ID : SB29.5938**

Amount of Each Disbursement this Period

30421.78
----------

Full Name (Last, First, Middle Initial)

**B. Civitas Public Affairs**

Mailing Address 601 13th Street, NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Strategic Consulting - IE only Acct.

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2013

**Transaction ID : SB29.5998**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**C. Civitas Public Affairs**

Mailing Address 601 13th Street, NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Strategic Consulting - IE Only Acct

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2013

**Transaction ID : SB29.6038**

Amount of Each Disbursement this Period

10000.00
----------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

50421.78
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 35

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Civitas Public Affairs**

Mailing Address 601 13th Street, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Expense Reimbursements (see memo entries) - IE Only Acct.

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2013

**Transaction ID : SB29.6041**

Amount of Each Disbursement this Period

187.48
--------

Full Name (Last, First, Middle Initial)

**B. Civitas Public Affairs**

Mailing Address 601 13th Street, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2013

**Transaction ID : SB29.6066**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**C. Fedex Office**

Mailing Address 1350 New York Avenue Northwest

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Delivery & Shipping Cost - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		18		2013

**Transaction ID : SB29.6124**

Amount of Each Disbursement this Period

327.71
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10515.19
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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

L PAC

**A. Maria L Galdo**

Mailing Address 7002 Cold Spring La

City	State	Zip Code
Alexandria	VA	22306

Purpose of Disbursement
Accounting Services - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB29.6069

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### B. Maria L Galdo

Mailing Address 7002 Cold Spring La

City	State	Zip Code
Alexandria	VA	22306

Purpose of Disbursement
Accounting Services - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB29.6070

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

### C. Gestalters Limited

Mailing Address 148 Madison Ave

City	State	Zip Code
New York	NY	10016

Purpose of Disbursement  
Website Development - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement



Transaction ID : SB29.5921

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00





# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 35

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

## **A. Salsa Labs**

Mailing Address PO Box 674533

City State Zip Code  
 Detroit MI 48267

Purpose of Disbursement  
 Website - IE Only Account

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 01 04 2013

**Transaction ID : SB29.5916**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

## **B. Salsa Labs**

Mailing Address PO Box 674533

City State Zip Code  
 Detroit MI 48267

Purpose of Disbursement  
 Website - IE Only Account

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 02 07 2013

**Transaction ID : SB29.5928**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

## **C. Salsa Labs**

Mailing Address PO Box 674533

City State Zip Code  
 Detroit MI 48267

Purpose of Disbursement  
 Website - IE only Acct.

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 04 09 2013

**Transaction ID : SB29.5996**

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 35

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**L PAC**

Full Name (Last, First, Middle Initial)

**A. Salsa Labs**

Mailing Address PO Box 674533

City	State	Zip Code
Detroit	MI	48267

Purpose of Disbursement  
Website - IE Only Acct

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2013

**Transaction ID : SB29.6013**

Amount of Each Disbursement this Period

400.00
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Full Name (Last, First, Middle Initial)

**B. Sandler, Reiff, Young & Lamb, PC**Mailing Address 1025 Vermont Ave., NW  
Suite 300

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Legal Fee - IE Account Only

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2013

**Transaction ID : SB29.6048**

Amount of Each Disbursement this Period

1320.00
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Full Name (Last, First, Middle Initial)

**C. Women Innkeepers Of Provincetown**

Mailing Address 102 Bradford Stre

City	State	Zip Code
Provincetown	MA	02657

Purpose of Disbursement  
Publishing - IE Only Account

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2013

**Transaction ID : SB29.5932**

Amount of Each Disbursement this Period

295.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2015.00
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103942.54
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